

KUBOVCIK & KUBOVCIK

Docket No. _____

COPY

Declaration For U.S. Patent Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled (INSERT TITLE) ACQUEOUS RESIN DISPERSION COMPOSITION AND PROCESS FOR PRODUCING THE SAME,
 the specification of which

(Check one
 of 1, 2, or
 3.)

1. ☐ is attached hereto.
2. ☒ was filed on June 11, 2003 as
 International PCT Application No. PCT/JP03/07389
 and was amended on December 12, 2003
 (if applicable)
3. ☐ was filed on _____ as
 U.S. Application Serial No. _____
 and was amended on _____
 (if applicable)

I hereby state that I have reviewed and understand the content of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application for which priority is claimed:

(List prior foreign applications)	(Number)	(Country)	(Day/Month/Year Filed)	Priority Claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	<u>2002-174814</u>	<u>Japan</u>	<u>14/06/2002</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	_____(Number)	_____(Country)	_____(Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
	_____(Number)	_____(Country)	_____(Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No

☐ See attached list for additional prior foreign applications

I hereby claim the benefit under Title 35, United States Code, §120, of any United States patent application listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56, which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

 (Application Serial No.)

 (Filing Date)

 (Status)

Docket No. _____

And I hereby appoint as principal attorney and agent Ronald J. Kubovcik, Reg. No. 25,401; and Keiko T. Kubovcik, Reg. No. 40,428.

Please direct all communications to the following address:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first or sole inventor: TSUNEDA Tatsuo

Inventor's Signature: 津田 隆雄 Date: November 12, 2004

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Full name of third inventor: MAEKAWA Shoji

Inventor's Signature: 前川 尚二 Date: November 12, 2004

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Full name of inventor: HATANO Kazuhiro

Inventor's Signature: 波多野 和宏 Date: November 12, 2004

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Full name of inventor: _____

Inventor's Signature: _____ Date: _____

Residence: _____

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Full name of inventor: _____

Inventor's Signature: _____ Date: _____

Residence: _____

Citizenship: _____

Post Office Address: _____

Full name of inventor: _____

Inventor's Signature: _____ Date: _____

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Citizenship: _____

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